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FROM:
Kenneth Smolik

COMPANY:
U.S. Patent Office

DATE:
May 9, 2005

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TOTAL NO. OF PAGES: (including cover sheet)
27

YOUR REFERENCE NO.:
10/007,824

OUR REFERENCE (C/M) NO.:
005222.00143

RE: U.S. Patent Appln. No. 10/007,824
In re: Beams, et al.
System, Method, and Article of Manufacture for Creating a Virtual Experience

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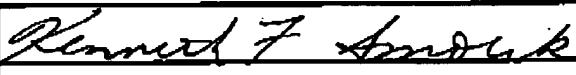
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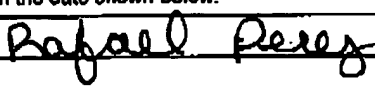
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/007,824
	Filing Date	November 5, 2001
	First Named Inventor	Brian R. Beams
	Art Unit	2143
	Examiner Name	David E. Eng and
Total Number of Pages in This Submission	Attorney Docket Number	005222.00141

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.63	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Reconsideration Facsimile Coversheet
Remarks The Commissioner is hereby authorized to charge any deficiencies in payment or credit any overpayment to our Deposit Account 19-0733.		

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Signature			
Printed Name	Kenneth Smolik		
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MAY 09 2005

In re U.S. Patent Application of Beams, et.
al.

Application No. 10/007,824

Filed: November 5, 2001

For: SYSTEM, METHOD, AND ARTICLE OF
MANUFACTURE FOR CREATING A
VIRTUAL EXPERIENCE

Examiner: England, David E

Group Art Unit: 2143

REQUEST FOR RECONSIDERATION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is in response to the Office Action mailed February 10, 2005. The Examiner set a three-month period for response, thus making this response due on or before May 10, 2005. It is believed there is no fee due in connection with this filing. If a fee is due, the Office is authorized to charge such a fee to Deposit Account No. 19-0733.

The Listing of Claims begins on page 2. No amendments have been introduced in this paper. The Remarks section begins on page 21.